CARDHOLDER STATEMENT OF QUESTIONED ITEM

CARDHOLDER NAME (please print or type)	ACCOUN	ACCOUNT NUMBER DATE (AREA CODE) TELEPHONE NUMBER	
CARDHOLDER SIGNATURE	DATE		
The transaction in question as shown on statement of Ac			G
Transaction Date Reference Number	Merchant	Amount	Statement Date
Please read carefully each of the following situations and check the one 888-994-6722. We will be more than happy to advise you in this matter		your particular dispute. If you have	e any questions, please contact us at
UNAUTHORIZED MAIL OR PHONE ORDER OR PL I have not authorized this charge to my account. I have not ordered		hone or mail, or received any goods	or services.
 DUPLICATE PROCESSING-THE DATE OF THE FII The transaction listed above represents a multiple billing to my ac posession at all times. 	RST TRANSAC	TION WAS	for this amount. My card was in my
3. MERCHANDISE OR SERVICE NOT RECEIVED IN [] My account has been charged for the above listed transaction, but matter was not resolved. (Please provide a separate statement detailing	I have not received	the merchandise or service. I have	
4. MERCHANDISE RETURNED IN THE AMOUNT OI [] My account has been charged for the above listed transaction, but *enclosed is a copy of my postal or express mail receipt*			
5. CREDIT NOT RECEIVED [] I have received a credit voucher for the above listed charge, but it a copy of this voucher with this correspondence.)	has not yet appeared	d on my account. A copy of the cree	dit voucher is enclosed. (Please provide
5. ALTERATION OF AMOUNT [] The amount of this charge has been altered since the time of purch difference of amount is \$	ase. Enclosed is a co	opy of my sales draft showing the a	mount of which I signed.The
7. INADEQUATE DESCRIPTION/UNRECOGNIZED CI [] I do not recognize this charge. Please supply a copy of the sales dr Questioned Item Form must be provided and will include the copy of will appear on my account.	aft for my review. I		
3. COPY REQUEST [] I recognize this charge, but need a copy of the sales draft for my re-	ecords.		
O. SERVICES NOT RECEIVED [] I have been billed for this transaction; however, the merchant was [] Paid for by another means. My card number was used to secure th purchase order. (Enclosed is my receipt, canceled check (front and b was made by other means).	is purchase, howeve	r final payment was made by check	
O. NOT AS DESCRIBED [] (Cardholder must specify what goods, services or other things of the merchant. (The cardholder must have attempted to return the merchant.)			
11. If none of the above reasons apply, please describe the	situation:		
ote: Provide a complete description of the problem, attempted resolution	and outstanding issu Send To:	es. Use a separate sheet of paper, if	necessary, and sign your description

U.S. Bank Government Services, P.O. Box 6347, Fargo, ND 58125-6347 **Fax:** 866-457-7506 or 701-461-3466

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